04/15/2016 15 : 32

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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation RIGHT WAY INITIATIVE, INC.		
(b) Address (number and street) check if different than previous PO BOX 27	isly reported	
(c) City, State and ZIP Code ALEXANDRIA 2. Occupation and Name of Employer (for Individual Filers Only)	VA 22313	3. FEC Identification Number C C90015801
4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? No Yes 5. COVERING PERIOD: FROM 01 / 01 THROUGH 03 / 31	24-Hour Report 48-Hour Report s, it amends the report filed on 2016	
TOTAL CONTRIBUTIONS 7. TOTAL INDEPENDENT EXPENDITURES		703491.10
Under penalty of perjury I certify that the independent expenditures reported herein we of, any candidate or authorized committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either, or any political party committee or agent of either or agent or either or		, or concert with, or at the request or suggestion
TYPE OR PRINT NAME OF PERSON COMPLETING FORM		DATE ectronically Filed]
MICHELE REISNER	MICHELE REISNER	04/15/2016
NOTE: Submission of false, erroneous or incomplete information may	y subject the person signing this report to	the penalties of 2 U.S.C. §437g.

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AME OF FILER (In Full) RIGHT WAY INITIATIVE, INC.			
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
ADVANTAGE INC			03 11 2016
Mailing Address 2300 CLARENDON BLVD			03 11 2010
SUITE 303			Amount
City ARLINGTON	State VA	Zip Code 22201	6926.00 Transaction ID : F57.4128
Purpose of Expenditure PHONE CALLS		Category/ Type 004	Office Sought: House State: OH Senate District: 08
Name of Federal Candidate Supported or Opp TIMOTHY DERICKSON	posed by Expend	iture:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		640363.50	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
ADVANTAGE INC			03 12 2016
Mailing Address 2300 CLARENDON BLVD			03 12 2010
SUITE 303			Amount
City	State	Zip Code	9561.36
ARLINGTON	VA	22201	Transaction ID : F57.4130
Purpose of Expenditure PHONE CALLS		Category/ Type 004	Office Sought: House State: OH Senate District: 08
Name of Federal Candidate Supported or Opp TIMOTHY DERICKSON	posed by Expend	iture:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		649924.86	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
ADVANTAGE INC Mailing Address 2200 CLARENDON BLVD			03 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
2300 CLARENDON BLVD SUITE 303			Amount
City	State	Zip Code	
ARLINGTON	VA	22201	6374.24
Purpose of Expenditure		Category/	Transaction ID : F57.4131 Office Sought: House State: OH
PHONE CALL'S Name of Federal Candidate Supported or Opp	acced by Evpand	Type 004	Senate District: 08 President
WARREN DAVIDSON	Dosed by Expend	nure.	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		656299.10	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Exper	ditures		22861.60
(b) SUBTOTAL of Unitemized Independent Exp	oenditures		
(c) TOTAL Independent Expenditures(carry total from last page forward to			······ Þ

PAGE 3 OF 8 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) RIGHT WAY INITIATIVE, INC.				
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
ADVANTAGE INC				03 13 2016
Mailing Address 2300 CLARENDON BLVD				15 2010
SUITE 303				Amount
City ARLINGTON	State VA	Zip Code 22201		9658.56 Transaction ID : F57.4132
Purpose of Expenditure PHONE CALLS		Category/ Type 004	Offi	ce Sought: House State: OH Senate District: 08
Name of Federal Candidate Supported or Opp TIMOTHY DERICKSON	osed by Expend	liture:	Che	President District: U8 President Oppose
Calendar Year-To-Date Per Election for Office Sought		665957.66	Disk	oursement For: Primary General 2016 Other (specify)
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
ADVANTAGE INC				M M / D D / Y Y Y Y Y
Mailing Address 2300 CLARENDON BLVD				03 13 2016
SUITE 303				Amount
City	State	Zip Code		6439.04
ARLINGTON	VA	22201		Transaction ID : F57.4133
Purpose of Expenditure PHONE CALLS		Category/ Type 004	Offi	ce Sought: House State: OH Senate 08
Name of Federal Candidate Supported or Opp WARREN DAVIDSON	osed by Expend	liture:	Che	President District: eck One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought		672396.70	Dist	oursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
ADVANTAGE INC Mailing Address 2200 CLARENDON BLVD				03 / 15 / 2016
2300 CLARENDON BLVD SUITE 303				Amount
City	State	Zip Code		21594.40
ARLINGTON	VA	22201		Transaction ID : F57.4134
Purpose of Expenditure PHONE CALLS		Category/ 004	Offic	ce Sought: X House State: OH
Name of Federal Candidate Supported or Opp	osed by Expend	Туре	_	Senate District:08 President
TIMOTHY DERICKSON	· ·			eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		703491.10	Dist	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expen	ditures		······•	37692.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures		······•	
(c) TOTAL Independent Expenditures(carry total from last page forward to			······•	

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AME OF FILER (In Full) RIGHT WAY INITIATIVE, INC.		
Full Name (Last, First, Middle Initial) of Payee AXIOM STRATEGIES		Date of Public Distribution/Dissemination
		02 26 2016
Mailing Address 1251 NW BRIARCLIFF PARK	WAY	
SUITE 85		Amount
City KANSAS CITY	State Zip Code MO 64116	17544.00 Transaction ID : F57.4109
Purpose of Expenditure PRINTING / POSTAGE	Category/ Type 004	Office Sought: House State: OH Senate District: 08
Name of Federal Candidate Supported or Oppo TIMOTHY DERICKSON	sed by Expenditure:	President Check One: Soriate District: Oppose
Calendar Year-To-Date Per Election for Office Sought	245910.00	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination
AXIOM STRATEGIES		02 29 2016
Mailing Address 1251 NW BRIARCLIFF PARK	WAY	02 29 2016
SUITE 85		Amount
City	State Zip Code	17544.00
KANSAS CITY	MO 64116	Transaction ID : F57.4112
Purpose of Expenditure PRINTING / POSTAGE	Category/ Type 004	Office Sought: House State: OH Senate 08
Name of Federal Candidate Supported or Opportimothy DERICKSON	sed by Expenditure:	President District: Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	263454.00	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination
Mailing Address 4254 NW PRIABOLIEE PARK		02 29 2016
1251 NW BRIARCLIFF PARK SUITE 85	WAY	Amount
City	State Zip Code	14375.00
KANSAS CITY	MO 64116	Transaction ID : F57.4137
Purpose of Expenditure MECIA PRODUCTION / MEDIA PLACEMENT	Category/ Type 004	Office Sought: House State: OH Senate Service 08
Name of Federal Candidate Supported or Oppo TIMOTHY DERICKSON	sed by Expenditure:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	277829.00	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expend	itures	49463.00
(b) SUBTOTAL of Unitemized Independent Expe	enditures	····· >
(c) TOTAL Independent Expenditures(carry total from last page forward to Li		

PAGE 5 OF 8 FOR LINE 7 OF FORM 5

IAME OF FILER (In Full) RIGHT WAY INITIATIVE, INC.		
RIGHT WAT INITIATIVE, INC.		
F. II Name (Least First Middle In Viel) of Parent		
Full Name (Last, First, Middle Initial) of Payee AXIOM STRATEGIES		Date of Public Distribution/Dissemination
		03 02 2016
Mailing Address 1251 NW BRIARCLIFF PARKWAY		Amount
SUITE 85 City State	Zip Code	Amount
KANSAS CITY MO	64116	17544.00
Purpose of Expenditure	Category/	Office Sought: House State: OH
PRINTING / POSTAGE	Type 004	Senate
Name of Federal Candidate Supported or Opposed by Expe	enditure:	President District:
TIMOTHY DERICKSON		Check One: Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary General
for Office Sought	295373.00	2016 Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination
AXIOM STRATEGIES		Date of Public Distribution/Dissemination
Mailing Address 1251 NW BRIARCLIFF PARKWAY		03 04 2016
SUITE 85		Amount
City State	Zip Code	47744.00
KANSAS CITY MO	64116	17544.00 Transaction ID : F57.4121
Purpose of Expenditure	Category/	Office Sought: House State: OH
PRINTING / POSTAGE	Type 004	Senate District: 08
Name of Federal Candidate Supported or Opposed by Expe	enditure:	President
TIMOTHY DERICKSON		Check One: X Support Oppose
Calendar Year-To-Date Per Election	242047.00	Disbursement For: Primary General
for Office Sought	312917.00	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination
AXIOM STRATEGIES		M M / D D / Y Y Y Y
Mailing Address 1251 NW BRIARCLIFF PARKWAY		03 06 2016
SUITE 85		Amount
City State	Zip Code	10937.50
KANSAS CITY MO	64116	Transaction ID : F57.4122
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	Office Sought: House State: OH
		Senate District:08
Name of Federal Candidate Supported or Opposed by Expe	enditure:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	323854.50	Disbursement For: Primary General
Tol Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		
(a) SSTOTAL OF ROMESON Mooperatoric Experiations		46025.50
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(carry total from last page forward to Line 7)		

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NAME OF FILER (In Full)		
RIGHT WAY INITIATIVE, INC.		
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination
AXIOM STRATEGIES		
		03 08 2016
Mailing Address 1251 NW BRIARCLIFF PARKWAY		
SUITE 85		Amount
City State	e Zip Code	38689.00
KANSAS CITY MO	64116	Transaction ID : F57.4123
Purpose of Expenditure	Category/ Of	ffice Sought: House State: OH
PRINTING / POSTAGE	Type 004	Senate 00
Name of Federal Candidate Supported or Opposed by Ex	roonditure	President District: U8
TIMOTHY DERICKSON	•	
	Cr	neck One: Support Oppose
Calendar Year-To-Date Per Election	Dis	sbursement For: Primary General
for Office Sought	362543.50	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		
		Date of Public Distribution/Dissemination
AXIOM STRATEGIES		03 09 2016
Mailing Address 1251 NW BRIARCLIFF PARKWAY		للنتالتا
SUITE 85		Amount
City	e Zip Code	50010.00
KANSAS CITY MO	64116	Transaction ID : F57.4124
Purpose of Expenditure	Catagory	
PRINTING / POSTAGE	Category/ Type 004	House State: OH Senate 08
Name of Foderal Condidate Cumparted as Opposed by Fo	an and itura	President District:
Name of Federal Candidate Supported or Opposed by ExTIMOTHY DERICKSON		
	OI	neck One: Support Oppose
Calendar Year-To-Date Per Election	Dis	sbursement For: Primary General
for Office Sought	412553.50	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	<u> </u>	Date of Public Distribution/Dissemination
AXIOM STRATEGIES		
		03 13 2016
Mailing Address 1251 NW BRIARCLIFF PARKWAY		
SUITE 85		Amount
City State	e Zip Code	9500.00
KANSAS CITY MO	64116	Transaction ID : F57.4135
Purpose of Expenditure	Category/ Of	fice Sought: House State: OH
MÉDIA PLACÉMENT	Type 004	Senate 08
Name of Federal Candidate Supported or Opposed by Ex	penditure:	District:
TIMOTHY DERICKSON	·	neck One: X Support Oppose
Calendar Year-To-Date Per Election	681896.70	sbursement For: Primary General
for Office Sought	001030.70	Other (specify)
1		
(a) SUBTOTAL of Itemized Independent Expenditures		98199.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
· ·	•	
(c) TOTAL Independent Expenditures		
(-,		7

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IAME OF FILER (In Full) RIGHT WAY INITIATIVE, INC.				
RIGHT WAT INITIATIVE, INC.				
Edit Name (Last First Middle Isina) of Par				
Full Name (Last, First, Middle Initial) of Payor DEL CIELO MEDIA LLC	ee			Date of Public Distribution/Dissemination
				02 24 2016
Mailing Address 1427 LESLIE AVENUE				Assessed
SUITE 102	01-1-	7'- 0-1-		Amount
City	State	Zip Code		215866.00
ALEXANDRIA	VA	22301		Transaction ID : F57.4105
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type	004	Office Sought: House State: OH Senate
Name of Federal Candidate Supported or O	Innosed by Expend	liture:		Senate District: 08 President
TIMOTHY DERICKSON	pposed by Expend	illule.		Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		215866	.00	Disbursement For: Primary General
ioi Onice Sought				Other (specify)
Full Name (Last, First, Middle Initial) of Payer	ee			Date of Public Distribution/Dissemination
DEL CIELO MEDIA LLC				03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1427 LESLIE AVENUE				00 11 2010
SUITE 102				Amount
City	State	Zip Code		220339.00
ALEXANDRIA	VA	22301		Transaction ID : F57.4125
Purpose of Expenditure		Category/	004	Office Sought: House State: OH
MEDIA PLACEMENT		Туре		Senate 08
Name of Federal Candidate Supported or C TIMOTHY DERICKSON	pposed by Expend	diture:		President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		632892	2.50	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payer	ee		·	Date of Public Distribution/Dissemination
FOUR CARD LLC				02 24 2016
Mailing Address 3788 RICHMOND AVENU	JE			02 24 2016
#1274				Amount
City	State	Zip Code		12500.00
HOUSTON	TX	77046		Transaction ID : F57.4107
Purpose of Expenditure		Category/	004	Office Sought: X House State: OH
MÉDIA PRODUCTION		Туре	004	Senate District: 08
Name of Federal Candidate Supported or C	pposed by Expend	diture:		President
TIMOTH BETTERON				Check One: Support Oppose
Calendar Year-To-Date Per Election		220200	00	Disbursement For: Primary General
for Office Sought		228366.	.00	Other (specify)
1				
(a) SUBTOTAL of Itemized Independent Exp	enditures			▶ 448705.00
(b) SUBTOTAL of Unitemized Independent E	expenditures			···· >
(c) TOTAL Independent Expenditures(carry total from last page forward to				···· >

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AME OF FILER (In Full)			•
RIGHT WAY INITIATIVE, INC.			
Full Name (Last, First, Middle Initial) of	f Davida		Data of Dahlie Distribution/Discomination
FOUR CARD LLC	Payee		Date of Public Distribution/Dissemination
Mailing Address 3788 RICHMOND AV	/ENUE		03 11 2016
#1274			Amount
City	State	Zip Code	545.00
HOUSTON	TX	77046	Transaction ID : F57.4126
Purpose of Expenditure MEDIA PRODUCTION		Category/ Type 004	Office Sought: House State: OH Senate District: 08
Name of Federal Candidate Supported TIMOTHY DERICKSON	or Opposed by Expend	liture:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Soug		633437.50	Disbursement For: Primary General 2016 Other (specify)
Full Name (Last, First, Middle Initial) of	f Pavee		Date of Public Distribution/Dissemination
,			Date of Public Distribution/Dissemination
Mailing Address			Amount
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: House State:
Name of Federal Candidate Supported	or Opposed by Expend	liture:	President District: Check One: Support Oppose
Calendar Year-To-Date Per Electio for Office Sough		7	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of	f Payee		Date of Public Distribution/Dissemination
			M M / D D / Y Y Y Y
Mailing Address			
			Amount
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported	or Opposed by Expend	liture:	President District.
			Check One: Support Oppose
Calendar Year-To-Date Per Electic for Office Sougl			Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independen	t Expenditures		····· > 545.00
(b) SUBTOTAL of Unitemized Independ	ent Expenditures		
(c) TOTAL Independent Expenditures (carry total from last page for			703491.10